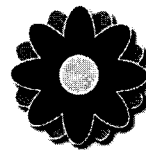


# THE NANOGRAM

Martha Jefferson Hospital Laboratory Services



Spring  
2018



## Important Phone Numbers

**Clinical Lab**  
654-7170 or  
fax 654-7164

**Anatomic Pathology  
Lab**  
654-7955 or  
fax 654-7944

**AP Client Services  
Representative,  
Noel Jorgensen**  
654-5525



## Welcome to New Lab Managers

Debbie House has accepted the position of Administrative Manager and will move into Bette Webber's role effective April 1<sup>st</sup>. Debbie is moving into her new role from Hematology where she was the Senior Tech.

Carl Lake has accepted the position of Outreach/Marketing Manager and will move into Carolyn Dotson's role effective April 1<sup>st</sup>. Carl is moving into his new role from the Infusion Center Lab where he was the Senior Tech.

**Congratulations!**

## Quarterly Newsletter on Website

This newsletter is from the Laboratory and will be distributed on a quarterly basis. It contains important information and news briefs concerning laboratory services. In addition to normal distribution, each issue will be posted at [www.cvillepathology.net](http://www.cvillepathology.net) under the News Brief section.

## Blood Culture Identification Panel by PCR (BCID)

On March 22, 2018 the Micro lab went live with the Blood Culture ID by PCR (BCID) using the Biofire FilmArray. With the ability to detect 23 organisms and 3 resistance mechanisms, the BCID panel will enable the lab to quickly report an ID and antimicrobial resistance gene to the physician. This will also enable the pharmacy to provide an effective therapy, de-escalate from broad spectrum antibiotic, if necessary, to a more narrow-spectrum antibiotic sooner than conventional culture methods and utilize the narrow spectrum therapies to decrease harmful effects to patients.

The BCID Panel will identify the following Bacteria, Yeast, and Antimicrobial Resistance Mechanisms:

Gram-Positive Bacteria	Gram-Negative Bacteria	Yeast
Enterococcus	Acinetobacter baumannii	Candida albicans
Listeria monocytogenes	Enterobacteriaceae	Candida glabrata
Staphylococcus	Enterobacter cloacae complex	Candida krusei
Staphylococcus aureus	Escherichia coli	Candida parapsilosis
Streptococcus	Klebsiella oxytoca	Candida tropicalis
Streptococcus agalactiae	Klebsiella pneumonia	
Streptococcus pneumoniae	Serratia marcescens	<b>Antimicrobial Resistance Genes</b>
Streptococcus pyogenes	Proteus	mecA - methicillin resistance
	Haemophilus influenza	vanA/B - vancomycin resistance
	Neisseria meningitidis (encapsulated)	KPC - carbapenem resistance
	Pseudomonas aeruginosa	

**Specimen:** Human blood culture samples identified as positive by continuous monitoring blood culture system that demonstrates the presence of organisms as determined by gram-stain.

The BCID Panel will be performed as part of the blood culture work-up when the culture become positive. A gram stain will still be performed first, with results called to the physician.

Please contact SMJH Lab Services with any questions at 434-654-7170.

BD Vacutainer® Plus Plastic Citrate Tube

### BD Vacutainer® Plus Plastic Citrate Tube Draw Volume Guide

**2.7 mL  
Draw  
Tube**  
12 mm x 75 mm  
Full Draw

Maximum Fill\*

Minimum Fill Indicator

**Now with  
Minimum Fill  
Indicator**

*Represents minimum  
volume of blood  
required for  
appropriate analysis*

*Sufficient volume achieved if blood drawn falls above minimum fill indicator. For blood transfer, do not fill above illustrated dashed maximum line.*

**Note:** The quantity of blood drawn into evacuated tubes varies with altitude, ambient temperature, barometric pressure, tube age, venous pressure and filling technique.

\*According to CLSI guideline, Dec. 2003, Cx-11-A5, Vol. 23, No. 33

## Coagulation Tube Filling

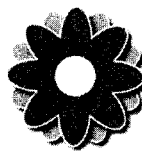
It is important to remember that our 2.7 ml blue top coagulation tubes need to be filled properly in order to get accurate results. If the plasma to anticoagulant ratio is not correct the results will not be reliable. Our current instrumentation will automatically reject any specimen that is under or overfilled. If you use a butterfly to draw you should use an extra tube to draw off the air volume in the butterfly tubing before filling the blue top tube.

Please be sure that all blood levels for these tubes exceed the minimum fill line and that the tube is not filled past the maximum fill line.

Visit Charlottesville Pathology's website at: [www.cvillepathology.net](http://www.cvillepathology.net)

# THE NANOGRAM

Martha Jefferson Hospital Laboratory Services



Spring  
2018



## Lab Leaders

**Jeff Willy, MBA, MT (ASCP)**  
Director, Lab Services

**Carolyn Dotson, MT (ASCP)**  
Lab Operations Manager

**Thea Alterman, MT (ASCP)**  
QC/QA Manager

**Bette Webber, MT (ASCP)**  
Lab Administrative Manager

**Sarah Harris, MSHS, MLT (ASCP)**  
Clinical Core Lab Manager

## Pathologists

**R. Hunt MacMillan III, MD**

**J. Tyler Green, MD**  
Director of Histology, Chemistry, Microbiology, and Blood Bank

**Laura Spinelli, MD**  
Medical Director, Lab Director of Cytology, Hematology, Serology, Coagulation, and Urinalysis

### Thin Prep & Sure Path Liquid Based Cytology

Occasionally there is marketing comparing these 2 tests sent to the offices. Please know that our team has reviewed both tests and have selected the test that is accurate, best for SMJH practitioners, and all inclusive.

If there are questions about any marketing you receive, please call SMJH Cytology to discuss at 434-654-5903 or email [ahlersch@sentara.com](mailto:ahlersch@sentara.com). **Ann L. Lewis, Sr. Tech**, in Cytology can help you.

## Retirements

It is with mixed emotions and sincere gratitude for their service that SMJH Lab Services announces the retirement of **Carolyn Dotson** and **Bette Webber** effective **Friday, May 4th 2018**.

Both Carolyn and Bette have held numerous positions in the lab from phlebotomist to bench Med Tech, Section Leader, and Manager. They have been dedicated, committed leaders who have helped move the lab forward by leaps and bounds over the course of their career. A complete list of their contributions to the hospital and Lab are too numerous to list but below is a very short list of some of their accomplishments.

**Carolyn has given 36 years of service to MJH Lab Services.** Carolyn pioneered the Lab Outreach business. She handled all aspects of Outreach from establishing and maintaining relationships with community physicians and staff, building EMR interfaces, billing and troubleshooting. She oversaw the implementation of the very first lab information system (Sunquest) for the hospital in 1986, to Cerner in 1999, and the implementation of Epic Beaker and Safetrace in 2016.

**Bette has given 40 years of service to MJH Lab Services.** She started as a phlebotomist working her way through Med Tech school. As a Section Leader for Blood Bank, Bette oversaw the implementation of the first lab info system (BB Sunquest). As Lab Admin Manager, Bette has overseen a plethora of new projects including numerous relocations for inpatient and outpatient phlebotomy, leading employee training for Epic Beaker go-live, developing a streamline interviewing process, hiring employees, and maintaining all employee records for orientation, training, competency. She has also been the HR liaison for Lab Services.

Carolyn and Bette will be greatly missed. Please join us in congratulating them on their well-deserved retirement!



## ANA Testing Availability

On April 10<sup>th</sup>, 2018, SMJH Laboratory will offer ANA Screens in house.

**LAB4281 ANA w/ Reflex** – This will include an ANA screen performed on the BioPlex multiplex flow immunoassay analyzer. If positive it will reflex to report out a quantitative dsDNA, RNP Antibodies, Smith (Sm) Antibodies, Sjogrens A (SS-A) Antibodies and Sjogrens B (SS-B) Antibodies.

**LAB4475 ANA Comprehensive Panel** - This panel will be performed on the BioPlex multiplex flow immunoassay analyzer. This panel will include dsDNA, RNP Antibodies, Smith Antibodies, SS-A Antibodies, SS-B Antibodies, Jo-1 Antibodies, Scl-70 Antibodies, Centromere B Antibodies, and Chromatin Antibodies.

Any of these components can also be ordered individually. Any questions can be directed to the lab at 434-654-7170.

## Meningitis/ Encephalitis by PCR

On Jan 3, 2018 the Micro lab went live with the new Meningitis/Encephalitis Panel by PCR. The Pathogens covered by this test include:

Escherichia coli K1	Haemophilus influenza	Streptococcus agalactiae
Listeria monocytogenes	Enterovirus	HSV 1 & 2
Cytomegalovirus	Neisseria meningitidis	Varicella Zoster
HHV-6	Human parechovirus	
Cryptococcus neoformans/gattii	Streptococcus pneumonia	

Non-K1 E coli serotypes & Non encapsulated strains of Neisseria meningitidis may be present but not be detected by the Film Array ME Panel.

**Specimen Requirements:** 1 ml of CSF obtained by lumbar puncture. For this test, Micro will need to use Tube #2. The test is not orderable in the system. It will be ordered by Micro as part of CSF culture automatically unless Micro is notified that it is not necessary to run the ME Panel by PCR.

**Note:** CSF collected from indwelling medical devices (e.g. shunts) is NOT ACCEPTABLE for this testing.

Questions can be directed to Micro at 654-7170.

The next Nanogram newsletter will be Summer 2018 distributed in July 2018.